



Bijlage 10 Publicaties

Artikelen

Noks Nauta, André Weel, Jim Faas. Stuur ontslagbrief ook naar de patiënt; Alleen verwijzer informeren is uit de tijd. Medisch Contact, 4 februari 2010; 65(5): 222-3.

Sylvia Buis, Medard Hilhorst. Wat doe ik met de brief van de bedrijfsarts? Opmerkingen bij de Code 'Gegevensuitwisseling in het kader van ziekte verzuim en dilemma's van de behandelingsarts. Medisch Contact, 28 oktober 2010; 65(43): 2276-9.

Inge den Besten, Noks Nauta, Jim Faas, André Weel, Kerst Zwart, Medard Hilhorst, Interdisciplinair werken bij arbeid en gezondheid: ethisch fricties (gesubmit).

Medard Hilhorst. Heeft de arts z'n langste tijd gehad? Tijdschrift voor Bedrijfs- en Verzekeringkunde, jg 18, nr 7, september 2010, p.300-301.

Abstracts (zie onder)

Inge den Besten et al. The need for ethics; Professional perspectives on work and health. G-I-N Annual Conference (Guidelines International Network), Conference Proceedings, Lissabon, 2009.

Noks Nauta et al. Value-based paragraphs in guidelines work and health. G-I-N Annual Conference (Guidelines International Network), Conference Proceedings, Lissabon, 2009.

Noks Nauta et al. Ethics and guidelines, ethics in guidelines. G-I-N Annual Conference, Conference Proceedings, Chicago, 2010.

Noks Nauta et al. Experiences with 'Ethics and guidelines, ethics in guidelines', Palacky University, Olomouc (Tsjechië), 2010.

Ontwikkelde materialen

Bruikbare casuïstiek en werkvormen voor onderwijs en trainingen (bijlagen 7 en 8).

Website

Op de websites van NVAB en NVVG zal dit eindrapport, met alle bijlagen, waaronder ook bovengenoemde materialen, voor iedereen toegankelijk en beschikbaar gemaakt worden.

Abstract GIN Lissabon, 2009,
The need for ethics. Professional perspectives on work and health,
Inge den Besten et al.

Background. On a daily basis professionals working in occupational health and in social insurance medicine have to deal with situations that give ethical food for thought. For example, clients do not act on guideline-based medical advice for quick recovery; employees are absent from work due to problems in their personal lives; privacy constraints hinder effective solutions. Professional issues are also at stake. Communication with attending physicians fails, their professional judgements can be contradictory, or professional views about who is responsible differ.

Purpose. Conflicting interests, also in terms of moral values, seem to be inherently connected to occupational health and social insurance practice. These conflicts are sharper and more complicated than they are in regular health care. The purpose of this study is to describe the multiple loyalties, in particular towards one's client, the customer / employer, one's employer, and society as a whole, as experienced by the professionals themselves, from an ethical perspective.

Methods. We have interviewed in-depth 32 health care professionals, working in occupational health and social insurance, as well as in regular health care: family doctors and other health professionals.

Results. We analysed the attitudes and background beliefs of these professionals, in particular their prevailing views on their professional role and their stance towards professional guidelines. Although most of the respondents acknowledge that professionals should judge consistently and uniformly, they differ in the way and to the extent in which they claim professional freedom, necessary to make their own balancing and independent judgements.

Discussion. We assess these different perspectives, the given justifications, and ask what possible contributions ethics can make. A promising solution might be the development of value-based guidelines (see parallel GIN-abstract 2009). This study is part of a larger project funded by the Netherlands organisation for health research and development (ZonMw).

Abstract GIN Lissabon, 2009
Value-based paragraphs in guidelines dealing with ethical perspectives on work and health,
Noks Nauta et al.

Background. On a daily basis professionals working in occupational health and in social insurance medicine have to deal with situations that give ethical food for thought. They differ in their objectives and perspectives from professionals that only treat the patients' medical condition. The predominant focus of the first group is the patients' functioning (in work and other activities). Therefore they often find it hard to balance other interests. Although professional considerations play a central role, it is less clear to what extent professionals have the freedom (autonomy) to interpret societal rules, ethical principles and professional guidelines in individual situations, as we have found in a qualitative study, based on in-depth interviews (see parallel GIN-abstract 2009).

Purpose. To develop and implement value-based paragraphs in guidelines, that deal with moral questions and support professionals in balancing conflicting interests in ethically sensitive situations.

Methods. In two interdisciplinary teams we explored the possibilities to insert ethical considerations and perspectives in two existing interdisciplinary professional guidelines, in a third team we explored the ethical issues involved.

Results. In a guideline on breast cancer the patient's preferences may play a greater role than is generally acknowledged, while in a guideline on depression we may wish to stimulate a closer cooperation between the health professionals involved. Value-based guidelines dealing with moral questions can indeed support professionals in ethically sensitive situations. In a third team we assessed the ethical issues, e.g. autonomy, privacy, professional judgement, justified expectations, financial interests and justice, and set up a moral framework that should guide professionals in implementing (new) value-based guidelines in the future.

Discussion. By being more explicit and transparent about inter-subjective values in professional judgement, we may improve the cooperation between professionals and the quality of decisions. Our findings and recommendations will be tested in practice and in an expert panel in the forthcoming months. This research is funded by the Netherlands organisation for health research and development (ZonMw).

Ethics and guidelines, ethics in guidelines? Ethical chapters in CPGs on dilemmas in work and health.

Arnolda Nauta, Inge E. den Besten, André Weel, Jim Faas, Kerst Zwart, Medard Hilhorst

Background: From a moral perspective producing CPGs and working according to these guidelines is good. Offering the best available treatment adds to wellbeing of patients. EBM consists of best research evidence, patient values and clinical expertise. Recently patients' perspectives have come into focus (shared decision making). Other arguments may arise from social, cultural, political, economical and ethical considerations. Especially in the area of 'work and health' these considerations play an important role. This poses dilemmas that ask for moral deliberation. Most clinical guidelines do not contain an ethical chapter and cannot guide us here. An approach for incorporation of ethical considerations into practice was developed and tested. We studied the feasibility and acceptability of an ethical chapter within a medical practice guideline.

Methods:

We discussed dilemmas in practice with patients and professionals. Two value-based chapters for multidisciplinary CPGs (depression and breast cancer) were written by multidisciplinary groups and tested in practice. A moral framework was composed for future guideline development and tested by developers.

Results:

Sick workers frequently experience tough dilemmas, e.g. whether or not to inform their occupational health physician. They expect professionals to improve their decision making and collaboration. Professionals are reluctant to share information and exchange the non-medical views on which they, often implicitly, base their decisions.

The moral framework and value-based chapters intend to give professionals guidance in ethical dilemmas. They should raise awareness, help to recognise ethical sensitive situations and support moral deliberation. We will present the results of the tests we carried out for users and developers.

Conclusions: It is feasible and accepted to write ethical chapters regarding work and health in guidelines. They should be an integral part of guideline development.

This study is funded by the Netherlands organisation for health research and development (ZonMw).

Learning aims

- Become aware of ethical dilemmas that exist in the area of work and health
- Understand how a moral framework and value based chapter can give guidance to professionals in health care
- Understand how to compose a value-based chapter in guidelines
- Understand how to coach developers of guidelines to write an ethical chapter

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Experiences with ‘Ethics and guidelines, ethics in guidelines? Ethical chapters in CPGs on dilemmas in work and health.’

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BACKGROUND

From a moral perspective, producing CPGs and working according to these guidelines is good. Offering the best available treatment adds to the well-being of patients. EBM consists of/is guided by the best research evidence, patient values, and clinical expertise. Recently, patients’ perspectives have come into focus (shared decision making).

Other considerations/arguments may arise from social, cultural, political, economic, and ethical considerations. Especially in the area of ‘work and health,’ these considerations play an important role. This poses dilemmas that ask for moral deliberation. Most clinical guidelines do not contain an ethical chapter and cannot guide us here. An approach for the incorporation of ethical considerations into practice was developed and tested.

STUDY QUESTION

What kinds of dilemmas are recognized in practice?

Is it feasible and acceptable to integrate an ethical chapter within a medical practice guideline?

METHODS

We discussed dilemmas in practice with patients and professionals. Two value-based chapters for multidisciplinary CPGs (depression and breast cancer) were written by multidisciplinary groups and tested in practice. A moral framework was composed for future guideline development and tested by developers.

RESULTS

Sick workers frequently experience tough dilemmas; e.g., whether or not to inform their occupational health physician about the specifics of their situation/circumstances/. They expect professionals to improve their decision making and collaboration. Professionals are reluctant to share information and exchange the nonmedical views on which they, often implicitly, base their decisions. The moral framework and value-based chapters intend to give professionals guidance in ethical dilemmas. They should raise awareness, help to recognize ethically sensitive situations, and support moral deliberation.

CONCLUSIONS

It is feasible and accepted by professionals and patients/employees to develop ethical chapters regarding work and health in guidelines. They should be an integral part of guideline development.

Moral case deliberation is helpful/useful, trained coaches are needed.

Outside the area of work and health there may be a need for ethical considerations in CPGs too.

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